

**UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
MONTHLY STATUS REPORT**

IN RE: **HENRY WILLIAMS, JR.**

Case No.: **08-31737**

Reporting Period: \_\_\_\_\_

FROM: \_\_\_\_\_

TO: \_\_\_\_\_

I certify under penalty of perjury that the information contained in the attached Monthly Status Report consisting of \_\_\_\_\_ pages (including exhibits and attachments) is true and correct to the best of my knowledge and belief.

Dated: \_\_\_\_\_  
Debtor Representative

I certify that I have reviewed the information contained in the attached Monthly Status Report consisting of \_\_\_\_\_ pages and based on my knowledge of this case and the debtor's financial and business affairs, this Monthly Status Report is accurate, complete, and does not contain any misrepresentation of which I am aware. I further certify that this report has been served on all parties as required by law of court order.

Dated: \_\_\_\_\_  
David R. Badger

NARRATIVE ON PROGRESS OF CASE:

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### CASH RECEIPTS AND DISBURSEMENTS

BEGINNING CASH POSITION is the same figure as the ENDING CASH POSITION of prior month.

#### BEGINNING CASH POSITION

DATE: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

CASH RECEIPTS	AMOUNT	CASH DISBURSEMENTS	AMOUNT
Description:		Description:	
		Inventory Purchased	
		Salaries/Wages	
		Taxes (Total)	
		Insurance (Total)	
		Unsecured Loan Payments	
		Utilities (Total)	
		Rent	
		Professional Fees	
		Maintenance/Repair	
		Maintenance/Repair	
		OTHER DISBURSEMENTS (List):	
TOTAL CASH RECEIPTS	\$	TOTAL DISBURSEMENTS	\$

#### ENDING CASH POSITION

DATE: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

## **PAYMENTS TO SECURED CREDITORS**

## No Secured Debt.

## No Secured Debt Payments Made During Reporting Period.

All Secured Debt Payments Made During Reporting Period Are Listed Below:

## **PAYMENTS ON PRE-PETITION DEBT**

No payments have been made on pre-petition unsecured debt during the reporting period.

All payments made on pre-petition unsecured debt during reporting period are listed below:

## BANK ACCOUNTS

ALL BANK STATEMENTS MUST BE ATTACHED FOR EACH ACCOUNT. PLEASE REPRODUCE THIS PAGE AND COMPLETE A SEPARATE PAGE FOR EACH ACCOUNT. ATTACH BANK STATEMENT TO CORRESPONDING PAGE.

Name of Bank: Regions Bank

Address of Bank: 19430 West Catawba Avenue  
Street and/or P.O. Box Number

Cornelius, North Carolina 28031  
City                      State                      Zip Code

Type of Account:  
(i.e., Payroll, Tax, Operating): Checking

Account Number: xxxxxxxx3792

**DATE PERIOD BEGINS:** \_\_\_\_\_

Ending Balance (per the attached bank statement for this period) \$

**Outstanding Deposits and Other Credits Not on Statement**

**Outstanding Checks and Other Debits Not on Statement**

**Ending Reconciled Balance\*** \$

DATE PERIOD ENDS:

Highest Daily Balance During Above Period: \$

\* The sum of the ending balances of all accounts must reconcile with the Ending Cash Position on the Cash Receipts and Disbursements Page.

## BANK ACCOUNTS

ALL BANK STATEMENTS MUST BE ATTACHED FOR EACH ACCOUNT. PLEASE REPRODUCE THIS PAGE AND COMPLETE A SEPARATE PAGE FOR EACH ACCOUNT. ATTACH BANK STATEMENT TO CORRESPONDING PAGE.

Name of Bank: Regions Bank

**Address of Bank:** 19430 West Catawba Avenue  
**Street and/or P.O. Box Number**

Type of Account:  
(i.e., Payroll, Tax, Operating): Checking

Account Number: xxxxxxxx7373

**DATE PERIOD BEGINS:** \_\_\_\_\_

Ending Balance (per the attached bank statement for this period) \$

**Outstanding Deposits and Other Credits Not on Statement**

### Outstanding Checks and Other Debits Not on Statement

### Ending Reconciled Balance\*

DATE PERIOD ENDS:

Highest Daily Balance During Above Period: \$

\* The sum of the ending balances of all accounts must reconcile with the Ending Cash Position on the Cash Receipts and Disbursements Page.

### **SALES/ACCOUNTS RECEIVABLE**

- I. Accounts Receivable Pending As Of: \$ (Date of Reporting Period)
- II. Sales (gross) During Reporting Period: \$
- III. Collections of Accounts Receivable During Reporting Period: \$
- IV. New Accounts Receivables Generated During Reporting Period: \$

Pending Pre & Post Petition	Total	Collectible	Uncollectible
0-30 DAYS	\$	\$	\$
31-60 DAYS	\$	\$	\$
61-90 DAYS	\$	\$	\$
91-120 DAYS	\$	\$	\$
120 DAYS AND OVER	\$	\$	\$
TOTAL	\$	\$	\$

### **INVENTORY (Cost Basis)**

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

### **LIST BY CATEGORY OF INVENTORY USED FOR PRODUCTION OR RESALE\*:**

CATEGORY	BEGINNING	USED ADDED	ADDED	ADJUSTED	ENDING
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
TOTALS	\$	\$	\$	\$	\$

\* Exclude capital items such as machinery and equipment and consumable items such as fuel and general supplies.

**SALARY/COMMISSION/INDEPENDENT CONTRACTOR PAYMENTS**

Insiders" (List name(s) and describe type of insider):

NAME	TYPE	AMOUNT PAID
		\$
		\$
		\$
		\$
		\$

**Non-Insider Employees:**  
**Type (i.e., Salaried Wage)**

NAME	AMOUNT PAID
	\$
	\$
	\$
	\$
	\$

**Commission/Bonus Payments:**

NAME	AMOUNT PAID
	\$
	\$
	\$
	\$
	\$

**Independent Contractors:**

NAME	TYPE	AMOUNT PAID
		\$
		\$
		\$
		\$
		\$

**Total Salary/Wage/Commission Payments:** \$ \_\_\_\_\_

\* "Insider" is defined in 11U.S.C. Section 101(31)

**ACCRUED POST-PETITION LIABILITIES**

\_\_\_\_\_ No accrued liabilities existed at the end of this reporting period.

\_\_\_\_\_ All accrued liabilities existing at the end of this reporting period are listed below or on the sheet(s) attached. Exclude current liabilities which are NOT past due.

NAME OF CREDITOR	DUE DATE	AMOUNT DUE
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Accrued Liabilities:		\$

### AFFIRMATIONS

- |              |          |  |
|--------------|----------|--|
| 1. Yes _____ | No _____ | All tangible assets of this bankruptcy estate are adequately and properly insured and all other insurance required by law or prudent business judgment are in force/ |
| 2. Yes _____ | No _____ | All insurance policies and renewals, if applicable, have been submitted to the Bankruptcy Administrator.   |
| 3. Yes _____ | No _____ | All tax returns have been filed timely and payments made. Copies of returns have been filed post-petition have been submitted to the Bankruptcy Administrator.       |
| 4. Yes _____ | No _____ | All post-petition taxes have been paid or deposited into a designated tax account.   |
| 5. Yes _____ | No _____ | New Debtor-In-Possession (DIP) bank accounts have been opened and have been reconciled.  |
| 6. Yes _____ | No _____ | New DIP financial books and records have been opened and are being maintained monthly and are current.   |

If the response is “no”, a listing must appear on the Accrued Post-Petition Liabilities sheet. The listing must include the name of the taxing authority, type of tax, the amount due and the period the tax was incurred.